	. 240089US67CONT					
PATENT APPLICATION First Inventor or Application Identifier Chauncey F LEVY	ation Identifier Chauncey F LEVY					
TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b)) Title DISTORTION-FREE IMAGING DEVICE HAVING CURVED PHOTOSENSO	REE IMAGING DEVICE HAVING CURVED PHOTOSENSOR					
Assignee Name: Assignee Address:						
APPLICATION ELEMENTS  See MPEP chapter 600 concerning utility patent application contents  ADDRESS TO:  Commissioner for Patents  Mail Stop Patent Application Alexandria, Virginia 22313	ADDRESS TO: Mail Stop Patent Application					
1. Fee Transmittal Form (e.g. PTO/SB/17)  (Submit an original and a duplicate for fee processing)  ACCOMPANYING APPLICATION PART	5					
7. Assignment Papers (cover sheet & docume	7. Assignment Papers (cover sheet & document(s))					
2. Specification Total Sheets 12 8. Application Data Sheet. See 37 CFR 1.76						
9.   37 C.F.R. §3.73(b) Statement Power (when there is an assignee)	ot ev					
3.  Drawing(s) (35 U.S.C. 113) Total Sheets 3 10.  English Translation Document (if applicable	· .					
11. ■ Information Disclosure Copie Statement (IDS)/PTO-1449	s of IDS					
4. Oath or Declaration Total Pages 2 12. Preliminary Amendment	2 = 1					
a. Newly executed (original or copy)  13. White Advance Serial No. Postcard	. 23 = 1					
b. Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)  14.   Certified Copy of Priority Document(s) (if foreign priority is claimed)	) 2 2 2 2 3 3 4 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1					
i. DELETION OF INVENTOR(S)  Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).  Applicant claims small entity status. See 37 CFR 1.27	61					
5. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  16. Other: Small Entity Declaration (copy) Submission of Application Data	Sheet					
6. Nucleotide and/or Amino Acid Sequence Submission Correspondence Address						
a. Computer Readable Form (CRF)  of Attorney (copy)	Revocation and New Appointment of Power of Attorney (copy)					
b. Specification or Sequence Listing on :						
i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ Paper						
c.   Statements verifying identity of above copies						
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:						
Continuation Divisional Continuation-in-part (CIP) of prior application no.: 09/007,755						
Prior application information: Examiner: TILLERY, R. N. Group Art Unit: 2612						
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
18. Amend the specification by inserting before the first line the sentence:						
☐ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)						
of application Serial No. Filed on  This application claims priority of provisional application Serial No. Filed						
☐ This application claims priority of provisional application Serial No. Filed  19. CORRESPONDENCE ADDRESS .						
Robert T. Pous 29,099						
Robert 1.1 29,099	Registration No. 239 22850					
Robert 1.7 Registration No. 29,099 22850						
Robert T. Pous Registration No. 29,099  22850 (703) 413-3000 FACSIMILE: (703) 413-2220						
(103) 413-3000						

Registration No.: 50,607

Name: Katherine D. Pauley
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240089US67CONT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TOR(S) Chauncey F LEVY

SERIAL NO:

**New CONT Application** 

FILING DATE: Herewith

FOR:

DISTORTION-FREE IMAGING DEVICE HAVING CURVED PHOTOSENSOR

## FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	1 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$84 =	\$0.00
☐ MULTIPLE DEPENDENT CLAIMS (If applicable) + \$280 =				\$0.00
☐ LATE FILING OF DECLARATION + \$130 =				\$0.00
	\$750.00			
	\$750.00			
■ REDUCTION BY 50% F	(\$375.00)			
☐ FILING IN NON-ENGLI	SH LANGUAGE		+ \$130 =	\$0.00
RECORDATION OF ASSIGNMENT		+ \$40 =	\$0.00	
			TOTAL	\$375.00

- ☐ Please charge Deposit Account No. <u>15-0030</u> in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.
- A check in the amount of \$375.00 to cover the filing fee is enclosed.
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Tel. (703) 413-3000 Fax. (703) 413-2220 (OSMMN 05/03)

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Respectfully Submitted,

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